

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

-----X  
In re:

Atlantic Yards Plaza, LLC

Case No. 19-73118

Chapter 11

Debtor(s)

-----X

**AFFIDAVIT PURSUANT TO LOCAL RULE 1007-1(b)**

Giorgios Menexas, Managing Member, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 11 of the Bankruptcy Code on April 25, 2019.
2. Schedule(s) A/B, D, E/F, G, H were not filed at the time of filing of the said petition, and is/are being filed herewith.
3. [Check applicable box]:
  - The schedules filed herewith reflect no additions or corrections to, or deletions from, list of creditors which accompanied the petition.
  - Annexed hereto is a listing of names and addresses of scheduled creditors added to or deleted from the list of creditors which accompanied the petition. Also listed, as applicable, are any scheduled creditors whose previously listed names and/or addresses have been corrected. The nature of the change (addition, deletion or correction) is indicated for each creditor listed.

1. [If creditors have been *added*] An amended mailing matrix is annexed hereto, listed added creditors **ONLY**, in the format prescribed by E.D.N.Y LBR 1007-3.

***Reminder: No amendment of schedules is effective until proof of service in accordance with E.D.N.Y LBR 1009-1(b) has been filed with the Court.***

Any additions to the list of creditors which accompanied the petition will be deemed an amendment to the list, if this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. The motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affirmation, all attachments and the amended schedules in accordance with E.D.N.Y LBR 1009-1.

Dated: June 10, 2019

18/ Giorgios Menexas  
Debtor (signature)

**ADDITION:**

NYS Department of Taxation & Finance  
Bankruptcy Unit - TCD  
Bldg 8 Room 455  
Albany, NY 12227

NYS Department of Taxation & Finance  
Bankruptcy Unit - TCD  
Bldg 8 Room 455  
Albany, NY 12227

Fill in this information to identify the case:

Debtor name Atlantic Yards Plaza, LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORKCase number (if known) 19-73118 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

 No. Go to Part 2. Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

 No. Go to Part 3. Yes Fill in the information below.**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

 No. Go to Part 4. Yes Fill in the information below.**Part 4: Investments**

13. Does the debtor own any investments?

 No. Go to Part 5. Yes Fill in the information below.**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

 No. Go to Part 6. Yes Fill in the information below.**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

 No. Go to Part 7.

Debtor Atlantic Yards Plaza, LLC  
NameCase number (*If known*) 19-73118 Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes Fill in the information below.**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes Fill in the information below.

	<b>General description</b> Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	<b>Net book value of debtor's interest</b> (Where available)	<b>Valuation method used for current value</b>	<b>Current value of debtor's interest</b>
47.	<b>Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
48.	<b>Watercraft, trailers, motors, and related accessories</b> <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	<b>Aircraft and accessories</b>			
50.	<b>Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b> <u>Restuarant equipment.</u>	\$0.00		\$250,000.00

**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$250,000.00

**52. Is a depreciation schedule available for any of the property listed in Part 8?** No Yes**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?** No Yes**Part 9: Real property****54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes Fill in the information below.**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?** No. Go to Part 11. Yes Fill in the information below.**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 2

Debtor Atlantic Yards Plaza, LLC  
Name

Case number (*If known*) 19-73118

No. Go to Part 12.  
 Yes Fill in the information below.

Debtor Atlantic Yards Plaza, LLC  
NameCase number (if known) 19-73118Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$250,000.00</u>	
88. Real property. <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$250,000.00</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$250,000.00</u>

Fill in this information to identify the case:

Debtor name Atlantic Yards Plaza, LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORKCase number (if known) 19-73118 Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

 No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form. Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A	Column B
	Amount of claim	Value of collateral that supports this claim	
	Do not deduct the value of collateral.		
2.1 <b>New Bank</b> Creditor's Name	Describe debtor's property that is subject to a lien <b>Restuarant equipment.</b>	<u>Unknown</u>	<u>\$250,000.00</u>
<b>146-01 Northern Boulevard Flushing, NY 11354</b> Creditor's mailing address	Describe the lien		
Creditor's email address, if known	Is the creditor an insider or related party?		
Date debt was incurred	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes	Is anyone else liable on this claim?	
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input type="checkbox"/> Contingent	<input type="checkbox"/> No	
	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)	
	<input type="checkbox"/> Disputed		
	As of the petition filing date, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$0.00****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name Atlantic Yards Plaza, LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORKCase number (if known) 19-73118 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.  
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>NYS Department of Tax &amp; Finance</b> <b>P.O. Box 4127</b> <b>Binghamton, NY 13902</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address <b>NYS Department of Taxation &amp; Finance</b> <b>Bankruptcy Unit-TCD</b> <b>Bldg 8 Room 455</b> <b>Albany, NY 12227</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$179,435.56</b> <b>\$0.00</b>
	Date or dates debt was incurred  2017-2018	Basis for the claim:  <b>Withholding and sales tax</b>	
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	<u>Atlantic Yards Plaza, LLC</u>	Case number (if known)	<u>19-73118</u>
Name			
3.1	<p>Nonpriority creditor's name and mailing address  <b>Ace Endico Food SVC</b>  <b>80 International Boulevard</b>  <b>Brewster, NY 10509</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>
3.2	<p>Nonpriority creditor's name and mailing address  <b>Action Environmental Services</b>  <b>451 Frelinghuysen Avenue</b>  <b>Newark, NJ 07114</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>
3.3	<p>Nonpriority creditor's name and mailing address  <b>AIWin Inc DBA Hotpoint App</b>  <b>5160 Van Nuys Boulevard, #250</b>  <b>Sherman Oaks, CA 91403</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>
3.4	<p>Nonpriority creditor's name and mailing address  <b>American Express National Bank</b>  <b>P.O. Box 30384</b>  <b>Salt Lake City, UT 84130</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>
3.5	<p>Nonpriority creditor's name and mailing address  <b>AMS</b>  <b>P.O. Box 540</b>  <b>Fair Lawn, NJ 07410</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>
3.6	<p>Nonpriority creditor's name and mailing address  <b>Asian Bok Choy Inc.</b>  <b>612 Grand Street</b>  <b>Brooklyn, NY 11211</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>
3.7	<p>Nonpriority creditor's name and mailing address  <b>Atlantic Terrace 12, LLC</b>  <b>621 Degraw Street</b>  <b>Brooklyn, NY 11217</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>Unknown</u>

Debtor	<b>Atlantic Yards Plaza, LLC</b> Name	Case number (if known)	<b>19-73118</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Bolster Media NYC</b> <b>330 East 54th Street, #2D</b> <b>New York, NY 10022</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Chase</b> <b>P.O. Box 6294</b> <b>Carol Stream, IL 60197</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>CMI Services Corp.</b> <b>240 Crossbay Boulevard</b> <b>Far Rockaway, NY 11693</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Coca-Cola Refreshments USA, Inc.</b> <b>P.O. Box 4108</b> <b>Boston, MA 02211</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Con Edison</b> <b>Jaf Station</b> <b>P.O. Box 1702</b> <b>New York, NY 10116</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Ecolab</b> <b>P.O. Box 32027</b> <b>New York, NY 10087</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Empire Merchant, LLC</b> <b>16 Bridgewater Street</b> <b>Brooklyn, NY 11222</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>

Debtor	<b>Atlantic Yards Plaza, LLC</b>	Case number (if known)	<b>19-73118</b>
Name			
3.15	<p>Nonpriority creditor's name and mailing address  <b>Force</b>  <b>5 Liszka Lane</b>  <b>Sayreville, NJ 08872</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.16	<p>Nonpriority creditor's name and mailing address  <b>Giorgios Menexas</b>  <b>4 Elm Sea Lane</b>  <b>Manhasset, NY 11030</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.17	<p>Nonpriority creditor's name and mailing address  <b>HotSchedules</b>  <b>6504 Bridge Point Parkway</b>  <b>Austin, TX 78730</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.18	<p>Nonpriority creditor's name and mailing address  <b>Internal Revenue Service</b>  <b>P.O. Box 7346</b>  <b>Philadelphia, PA 19101-7346</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.19	<p>Nonpriority creditor's name and mailing address  <b>Joseph, Mann &amp; Creed</b>  <b>8948 Canyon Falls Blvd, Suite 200</b>  <b>Twinsburg, OH 44087</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.20	<p>Nonpriority creditor's name and mailing address  <b>L. Knift &amp; Son, INC.</b>  <b>35 Elder Avenue Extension</b>  <b>Kingston, MA 02364</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.21	<p>Nonpriority creditor's name and mailing address  <b>Manhattan Beer Distribution</b>  <b>P.O. Box 27458</b>  <b>New York, NY 10087</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>

Debtor	<b>Atlantic Yards Plaza, LLC</b> Name	Case number (if known)	<b>19-73118</b>
3.22 Nonpriority creditor's name and mailing address <b>National Grid</b> P.O. Box 11741 Newark, NJ 07101-4741		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23 Nonpriority creditor's name and mailing address <b>NCR Corporation</b> P.O. Box 198755 Atlanta, GA 30384		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24 Nonpriority creditor's name and mailing address <b>New York Wine and Spirits</b> 10 Dunningan Drive Suffern, NY 10901		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25 Nonpriority creditor's name and mailing address <b>Noble Management Group</b> 228 Park Avenue South, #48897 New York, NY 10003		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.26 Nonpriority creditor's name and mailing address <b>NUCO2 LLC</b> P.O. Box 417902 Boston, MA 02241		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.27 Nonpriority creditor's name and mailing address <b>NYC Refrigeration Mechanic Corp.</b> 2357 31st Street Astoria, NY 11105		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28 Nonpriority creditor's name and mailing address <b>NYS Dept of Labor</b> P.O. Box 4127 Binghamton, NY 13902		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<u>Atlantic Yards Plaza, LLC</u> Name	Case number (if known)	<u>19-73118</u>
3.29 Nonpriority creditor's name and mailing address <b>Open Table</b> 1 Montgomery Street, Suite 700 San Francisco, CA 94104		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30 Nonpriority creditor's name and mailing address <b>Quality Star Development</b> 228 Park Avenue South, #48897 New York, NY 10003		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31 Nonpriority creditor's name and mailing address <b>Riviera Produce</b> Box/Call #6065 Englewood, NJ 07631		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32 Nonpriority creditor's name and mailing address <b>Rivkin Radler</b> 926 RXR Plaza Uniondale, NY 11556-0926		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.33 Nonpriority creditor's name and mailing address <b>RJ Linen &amp; Uniforms</b> 305 N. Macquesten Parkway Mount Vernon, NY 10550		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.34 Nonpriority creditor's name and mailing address <b>Shurnik Vines</b> P.O. Box 1315 Syosset, NY 11791		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35 Nonpriority creditor's name and mailing address <b>Southern Glazer's Wine &amp; Spirits of NY</b> P.O. Box 3143 Hicksville, NY 11802		As of the petition filing date, the claim is: <i>Check all that apply.</i>	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Atlantic Yards Plaza, LLC</b> Name	Case number (if known)	<b>19-73118</b>
3.36	<p>Nonpriority creditor's name and mailing address  <b>St. Johns Produce</b>  <b>P.O. Box 34</b>  <b>Albertson, NY 11507</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.37	<p>Nonpriority creditor's name and mailing address  <b>Stanley Steamer International Inc.</b>  <b>P.O. Box 205819</b>  <b>Dallas, TX 75320</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.38	<p>Nonpriority creditor's name and mailing address  <b>Stern Environmental Group, LLC</b>  <b>30 Seaview Drive</b>  <b>Secaucus, NJ 07094</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.39	<p>Nonpriority creditor's name and mailing address  <b>Steven Menexas</b>  <b>301 Vanderbilt Parkway</b>  <b>Huntington Station, NY 11746</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.40	<p>Nonpriority creditor's name and mailing address  <b>The Sam Tell Companies</b>  <b>300 Smith Street</b>  <b>Farmingdale, NY 11735</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.41	<p>Nonpriority creditor's name and mailing address  <b>Tri State Carbonation</b>  <b>216 E. Broadway #2</b>  <b>Monticello, NY 12701</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.42	<p>Nonpriority creditor's name and mailing address  <b>Union Beer Distributors</b>  <b>1213-17 Grand Street</b>  <b>Brooklyn, NY 11211</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>

Debtor	<b>Atlantic Yards Plaza, LLC</b>	Case number (if known)	<b>19-73118</b>
Name			
3.43	Nonpriority creditor's name and mailing address <b>Verizon P.O. Box 15124 Albany, NY 12212</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
--------------------------	--	---

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	<b>179,435.56</b>
5b.	+	\$ 0.00
5c.	\$	<b>179,435.56</b>

Fill in this information to identify the case:

Debtor name Atlantic Yards Plaza, LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORKCase number (if known) 19-73118 Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

 No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form. Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

## 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

Lease for commercial space

State the term remaining

Atlantic Terrace 12, LLC  
621 DeGraw Street  
Brooklyn, NY

List the contract number of any government contract

Fill in this information to identify the case:

Debtor name Atlantic Yards Plaza, LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORKCase number (if known) 19-73118 Check if this is an amended filing

## Official Form 206H

### Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

#### 1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address			Name	Check all schedules that apply:
2.1		Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	Zip Code		
2.2		Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	Zip Code		
2.3		Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	Zip Code		
2.4		Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	Zip Code		

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

-----X  
In re:

Chapter 11

ATLANTIC YARDS PLAZA, LLC

Case No.: 19-73118

Debtor

-----X

**AFFIDAVIT OF SERVICE**

STATE OF NEW YORK )  
                          ) ss.:  
COUNTY OF NASSAU )

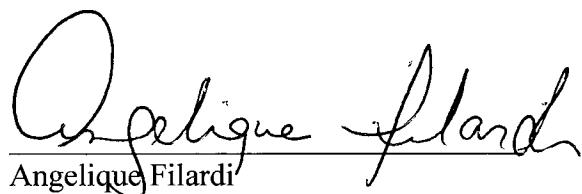
Angelique Filardi, being duly sworn, deposes and says:

Deponent is not a party to the action, is over 18 years of age and resides in Plainview, New York.

On June 14, 2019, deponent served a copy of the within **Schedule A/B, D, E/F, G & H** by regular mail upon the parties listed on the annexed list at the addresses listed, said addresses designated for that purpose, by depositing a true copy of same enclosed in a post paid, properly address wrapper, in an official depository under the exclusive care and custody of the United States Postal Service within the State of New York by regular mail.

U.S. Trustee  
Long Island Federal Courthouse  
560 Federal Plaza - Room 560  
Central Islip, New York 11722

NYS Dept. Taxation & Finance  
Bankruptcy Unit - TCD  
Bldg 8 Room 455  
Albany, New York 12227



Angelique Filardi

Sworn to me this 14<sup>th</sup>  
day of June, 2019



NOTARY PUBLIC

STEVEN E. SHUMER  
Notary Public, State of New York  
No. 02SH5007184  
Qualified in Suffolk County  
Commission Expires January 25, 2023